

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Impact

ADDRESS (number and street)

509 Madison Ave.

Suite 1902

☐Check if different
than previously
reported. (ACC)

New York

NY

10022

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00348607

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

03

01

2008

through

03

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

David A. Barrett

Signature of Treasurer

Electronically Filed by David A. Barrett

Date

05

20

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**

(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Impact

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		152123.20
(b) Cash on Hand at Beginning of Reporting Period	145283.03	
(c) Total Receipts (from Line 19)	59509.52	77156.23
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	204792.55	229279.43
7. Total Disbursements (from Line 31)	102721.40	127208.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	102071.15	102071.15
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Impact

Report Covering the Period:

From:

M M D D Y Y W Y
0 3 0 1 2 0 0 8

To:

M M D D Y Y Y Y
0 3 3 1 2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	16250.00	16250.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	16250.00	16250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	43000.00	60000.00
(c) Other Political Committees (such as PACs)	59250.00	76250.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	25.90
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	259.52	880.33
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	59509.52	77156.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	59509.52	77156.23

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	17721.40	27208.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	17721.40	27208.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	85000.00	100000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	102721.40	127208.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	102721.40	127208.28

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	59250.00	76250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	59250.00	76250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17721.40	27208.28
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	25.90
38. Net Operating Expenditures (subtract Line 37 from Line 36)	17721.40	27182.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Shawn K. Baird

Mailing Address 1346 SE Tenino St.

City

Portland

State

OR

Zip Code

97202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Woodburn Ambulance Service

Occupation
COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39150

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Timothy Bangs

Mailing Address 201 Tudor Rd.

City

Ithaca

State

NY

Zip Code

14850

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bangs Ambulance Inc.

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39127

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Dale J. Berry

Mailing Address 10188 Royce Dr.

City

South Lyon

State

MI

Zip Code

48176

FEC ID number of contributing
federal political committee.

C

Name of Employer
Huron Valley Ambulance

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39147

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

David Bonderman

Mailing Address 301 Commerce St. Suite 3300

City

Fort Worth

State

TX

Zip Code

76102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Texas Pacific Group

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: C39165

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Shirley A. Cloyes

Mailing Address 1607 Eagle Bay Dr.

City

Ossining

State

NY

Zip Code

10562

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: C39167

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Robert W. Davis

Mailing Address 35 Paul Jones Dr.

City

Brick

State

NJ

Zip Code

08723

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alert Ambulance

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 2 / 2 0 0 8

Transaction ID: C39155

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 31

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

James A. Finger

Mailing Address 18 Central Ave.

City

Rutland

State

VT

Zip Code

05701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regional Ambulance Services

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	8

Transaction ID: C39148

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Raymond Florida

Mailing Address 550 3rd Ave.

City

Pelham

State

NY

Zip Code

10803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regional EMS

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	0	8

Transaction ID: C39157

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Heidi M. Fuiten

Mailing Address 9240 NW Groveland Rd.

City

Hillsboro

State

OR

Zip Code

97124

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metro West Ambulance

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	8

Transaction ID: C39159

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Rachel B. Harracksingh

Mailing Address 10629 Sombra Verde Dr.

City

El Paso

State

TX

Zip Code

79935

FEC ID number of contributing
federal political committee.

C

Name of Employer
Life Ambulance Service

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39146

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Russell S. Honeycutt

Mailing Address 223 Pebblebrook Ln.

City

Macon

State

GA

Zip Code

31220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mid Georgia Ambulance

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39141

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

James S. Johnson

Mailing Address P.O. Box 801

City

Enid

State

OK

Zip Code

73702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Life EMS Inc.

Occupation

President/Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39128

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Richard B. Kimball, Jr.

Mailing Address 225 Sunset Cir.

City

Horseheads

State

NY

Zip Code

14845

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erway Ambulance

Occupation
Paramedic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39133

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Kevin M. Lyons

Mailing Address 38 Ledgewood Dr.

City

Danvers

State

MA

Zip Code

01923

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Ambulance service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39132

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

James P. McPartlon, III

Mailing Address 1015 DiBella Dr.

City

Schenectady

State

NY

Zip Code

12303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mohawk Ambulance Service

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39130

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Mark D. Meijer

Mailing Address P.O. Box 2284

City

Grand Rapids

State

MI

Zip Code

49501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Life EMS Inc.

Occupation
Paramedic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39129

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Louis K. Meyer

Mailing Address 10644 Oakwilde Ave.

City

Stockton

State

CA

Zip Code

95212

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Medical Response

Occupation
Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39138

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

John R.F. Miller

Mailing Address 7849 CR 12

City

Savona

State

NY

Zip Code

14879

FEC ID number of contributing
federal political committee.

C

Name of Employer
Finger Lakes Ambulance

Occupation
Operations Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39137

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Steven G. Murphy

Mailing Address 9840 Rosemont Ave. #303

City

Lone Tree

State

CO

Zip Code

80124

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Medical Response

Occupation

Executive VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39139

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Daniel W. O'Brien

Mailing Address 1005 Dunbar Hill Rd.

City

Hamden

State

CT

Zip Code

06514

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Medical Response

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39142

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Suzanne Rapisarda

Mailing Address 3824 Fillmore Ave.

City

Brooklyn

State

NY

Zip Code

11234

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 0 8

Transaction ID: C39154

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Ruth T. Reisner

Mailing Address 305 North 8th St.

City

Olean

State

NY

Zip Code

14760

FEC ID number of contributing
federal political committee.

C

Name of Employer
Trans Am Ambulance Services
Inc.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39144

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Julie-Anne Rose

Mailing Address 1123 Chestnut Dr.

City

Ashtabula

State

OH

Zip Code

44004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Community Care Ambulance

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39151

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

William F. Ryan

Mailing Address 35 Combes Dr.

City

Manhasset

State

NY

Zip Code

11030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Zoll Data Systems

Occupation
Sales Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39149

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Randall L. Strozyk

Mailing Address 9209 181st Ave. East

City

Bonney Lake

State

WA

Zip Code

98390

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Medical Response

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39143

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Kurt W. Williams

Mailing Address P.O. Box 420400

City

San Diego

State

CA

Zip Code

92142

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Medical Response

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39135

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Donna Wood

Mailing Address 19965 High Meadow Dr.

City

Woodmoor

State

CO

Zip Code

80132

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39140

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Gerald L. Zapolnik

Mailing Address 1116 Rathfon Circle

City

Saline

State

MI

Zip Code

48176

FEC ID number of contributing
federal political committee.

C

Name of Employer
Huron Valley Ambulance

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39145

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

16250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Acadian Ambulance Employee Federal PAC

Mailing Address P.O. Box 98000

City

Lafayette

State

LA

Zip Code

70509

FEC ID number of contributing
federal political committee.

C C00335570

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39134

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Albanian American Public Affairs Committee

Mailing Address 1940 Commerce St. Suite 108

City

Yorktown Heights

State

NY

Zip Code

10598

FEC ID number of contributing
federal political committee.

C C00278689

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: C39164

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

American Ambulance Assoc. Federal PAC

Mailing Address 8201 Greensboro Dr.
Suite 300

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing
federal political committee.

C C00168070

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39152

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

American Express PAC

Mailing Address 801 Pennsylvania Ave., NW
Suite 650

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00040535

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: C39166

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

American Medical Response PAC

Mailing Address 6200 S. Syracuse Way Suite 200

City State Zip Code
Greenwood Village CO 80111

FEC ID number of contributing
federal political committee.

C C00389585

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39136

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Bank of America Corporation PAC

Mailing Address 600 Peachtree St., NE
Third Floor

City State Zip Code
Atlanta GA 30308

FEC ID number of contributing
federal political committee.

C C00043489

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 0 / 2 0 0 8

Transaction ID: C39156

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Blue Cross Blue Shield Assoc. PAC

Mailing Address 1310 G Street, NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00194746

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: C39161

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Deloitte & Touche Federal PAC

Mailing Address PO Box 365

City

Washington

State

DC

Zip Code

20044

FEC ID number of contributing
federal political committee.

C C00211318

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 0 8

Transaction ID: C39158

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

FMR Corp. Political Action Committee

Mailing Address 82 Devonshire St.

City

Boston

State

MA

Zip Code

02109

FEC ID number of contributing
federal political committee.

C C00215046

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: C39162

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 31

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Freddie PAC

Mailing Address 8200 Jones Branch Rd.
Mailstop 604

City State Zip Code
McLean VA 22102

FEC ID number of contributing
federal political committee.

C C00404129

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39153

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Rural Metro Federal Management PAC

Mailing Address 9221 E. Via De Ventura

City State Zip Code
Scottsdale AZ 85258

FEC ID number of contributing
federal political committee.

C C00288613

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: C39131

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Securities Industry & Financial Markets Assoc. PAC

Mailing Address 1101 New York Ave. NW 8th Fl.

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00431312

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: C39163

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

43000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 31

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Impact

A.

Full Name (Last, First, Middle Initial)

Citizens Bank

Mailing Address 720 South Main Street

City

Sharon

State

MA

Zip Code

02067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

880.33

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: C39160

Amount of Each Receipt this Period

259.52

* Interest

SUBTOTAL of Receipts This Page (optional)

259.52

TOTAL This Period (last page this line number only)

259.52

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Impact

A.

Full Name (Last, First, Middle Initial)
509 Madison Avenue Associates, LP

Mailing Address c/o Kensico Properties
509 Madison Ave.

City State Zip Code
New York NY 10022

Purpose of Disbursement
Rent (includes utilities)

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6238

Date of Disbursement

03 / 01 / 2008

Amount of Each Disbursement this Period

322.88

B.

Full Name (Last, First, Middle Initial)
Kelly Glynn

Mailing Address 226 East 70th St.
Apt. 4-H

City State Zip Code
New York NY 10021

Purpose of Disbursement
Consulting Services-Fundraising

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6209

Date of Disbursement

03 / 01 / 2008

Amount of Each Disbursement this Period

500.00

Not for Federal Candidate

C.

Full Name (Last, First, Middle Initial)
Kelly Glynn

Mailing Address 226 East 70th St.
Apt. 4-H

City State Zip Code
New York NY 10021

Purpose of Disbursement
Reception-Catering

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6215

Date of Disbursement

03 / 17 / 2008

Amount of Each Disbursement this Period

165.22

Not for Federal Candidate

SUBTOTAL of Disbursements This Page (optional)

988.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Impact

A.

Full Name (Last, First, Middle Initial)
New York Yankees

Mailing Address River Ave. & East 161st

City State Zip Code
Bronx NY 10451

Purpose of Disbursement
Reception-Facilities

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6212

Date of Disbursement

03 / 10 / 2008

Amount of Each Disbursement this Period

14000.00

Not for Federal Candidate

B.

Full Name (Last, First, Middle Initial)
Brad Thompson

Mailing Address c/o IMPACT
509 Madison Ave., Ste. 1902

City State Zip Code
New York NY 10022

Purpose of Disbursement
Consulting Services-Fundraising

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6210

Date of Disbursement

03 / 01 / 2008

Amount of Each Disbursement this Period

1000.00

Not for Federal Candidate

C.

Full Name (Last, First, Middle Initial)
Brad Thompson

Mailing Address c/o IMPACT
509 Madison Ave., Ste. 1902

City State Zip Code
New York NY 10022

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6233

Date of Disbursement

03 / 31 / 2008

Amount of Each Disbursement this Period

188.00

SUBTOTAL of Disbursements This Page (optional)

15188.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Impact

A.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6211

Date of Disbursement

03 / 10 / 2008

Amount of Each Disbursement this Period

49.40

B.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6232

Date of Disbursement

03 / 31 / 2008

Amount of Each Disbursement this Period

80.70

C.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address P.O. Box 2853

City New York State NY Zip Code 10116

Purpose of Disbursement
Credit Card - See Below if Itemized

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6231

Date of Disbursement

03 / 28 / 2008

Amount of Each Disbursement this Period

1415.20

SUBTOTAL of Disbursements This Page (optional)

1545.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Impact

A.

Full Name (Last, First, Middle Initial)

Amtrak

Mailing Address 10 G Street, NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6234

Date of Disbursement

03 / 28 / 2008

Amount of Each Disbursement this Period

292.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Charlie Palmer Steakhouse

Mailing Address 101 Constitution Ave.

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Reception-Catering Not for Fed Candidate

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6235

Date of Disbursement

03 / 28 / 2008

Amount of Each Disbursement this Period

1038.80

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

17721.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Impact

A. Full Name (Last, First, Middle Initial) Al Franken for Senate Mailing Address P.O. Box 583144	Transaction ID: D6223 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	0	8													
City Minneapolis State MN Zip Code 55458 Purpose of Disbursement 2008 MN-S--General Candidate Name Al Franken Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼ State: MN District:	Amount of Each Disbursement this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																				
5000.00																						
B. Full Name (Last, First, Middle Initial) Al Franken for Senate Mailing Address P.O. Box 583144 City Minneapolis State MN Zip Code 55458 Purpose of Disbursement 2008 MN-S--Primary Candidate Name Al Franken Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: MN District:	Transaction ID: D6222 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	8	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	0	8													
5000.00																						
C. Full Name (Last, First, Middle Initial) Citizens for Biden Mailing Address P.O. Box 371 City Wilmington State DE Zip Code 19899 Purpose of Disbursement 2008 DE-S--Primary Candidate Name Joseph R. Biden, Jr. Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: DE District:	Transaction ID: D6227 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>5000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	8	5000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	0	8													
5000.00																						

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Impact

A. Full Name (Last, First, Middle Initial) Citizens for Harkin	Transaction ID: D6229 Date of Disbursement																				
Mailing Address PO Box 811	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	8												
City Des Moines State IA Zip Code 50304	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2008 IA-S--Primary	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Thomas R. Harkin	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Friends of Bruce Lunsford	Transaction ID: D6217 Date of Disbursement																				
Mailing Address 1500 Bardstown Rd. 2nd Fl.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	8												
City Louisville State KY Zip Code 40205	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2008 KY-S--General	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Bruce Lunsford	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Friends of Bruce Lunsford	Transaction ID: D6216 Date of Disbursement																				
Mailing Address 1500 Bardstown Rd. 2nd Fl.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	8												
City Louisville State KY Zip Code 40205	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2008 KY-S--Primary	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Bruce Lunsford	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Impact**A.**Full Name (Last, First, Middle Initial)
Friends of Jay Rockefeller

Mailing Address P.O. Box 1909

City Charleston State WV Zip Code 25327

Purpose of Disbursement
2008 WV-S--PrimaryCandidate Name
John D. Rockefeller, IVOffice Sought: ☐ House
☒ Senate
☐ President

State: WV District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6228

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	8

Amount of Each Disbursement this Period

5000.00

B.Full Name (Last, First, Middle Initial)
Hagan Senate Committee Inc.

Mailing Address 324 W. Wendover Ave.

City Greensboro State NC Zip Code 27408

Purpose of Disbursement
2008 NC-S--GeneralCandidate Name
Kay R. HaganOffice Sought: ☐ House
☒ Senate
☐ President

State: NC District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D6214

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	0	8

Amount of Each Disbursement this Period

5000.00

C.Full Name (Last, First, Middle Initial)
Hagan Senate Committee Inc.

Mailing Address 324 W. Wendover Ave.

City Greensboro State NC Zip Code 27408

Purpose of Disbursement
2008 NC-S--PrimaryCandidate Name
Kay R. HaganOffice Sought: ☐ House
☒ Senate
☐ President

State: NC District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D6213

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	0	8

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 31

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Impact

A.

Full Name (Last, First, Middle Initial)

John Kerry for Senate

Mailing Address 10 G St. NE #710

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
2008 MA-S--Primary

Candidate Name
John F. Kerry

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Transaction ID: D6230

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Lautenberg for Senate

Mailing Address 303 George St.
6th Fl

City
New Brunswick

State
NJ

Zip Code
08901

Purpose of Disbursement
2008 NJ-S--General

Candidate Name
Frank R. Lautenberg

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District:

Transaction ID: D6226

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Lautenberg for Senate

Mailing Address 303 George St.
6th Fl

City
New Brunswick

State
NJ

Zip Code
08901

Purpose of Disbursement
2008 NJ-S--Primary

Candidate Name
Frank R. Lautenberg

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District:

Transaction ID: D6225

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 31

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Impact

A.

Full Name (Last, First, Middle Initial)
Martin for Senate Inc.

Mailing Address P.O. Box 7219

City Atlanta State GA Zip Code 30357

Purpose of Disbursement
2008 GA-S--Primary

Candidate Name
James F. Martin

Office Sought: ☐ House
☒ Senate
☐ President

State: GA District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: D6220

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Martin for Senate Inc.

Mailing Address P.O. Box 7219

City Atlanta State GA Zip Code 30357

Purpose of Disbursement
2008 GA-S--General

Candidate Name
James F. Martin

Office Sought: ☐ House
☒ Senate
☐ President

State: GA District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: D6221

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Musgrove for U.S. Senate

Mailing Address 600 Concourse Suite 100
1076 Highland Colony Parkway

City Ridgeland State MS Zip Code 39157

Purpose of Disbursement
2008 MS-S--General

Candidate Name
David R. Musgrove

Office Sought: ☐ House
☒ Senate
☐ President

State: MS District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: D6224

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 31

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Impact

A.

Full Name (Last, First, Middle Initial)
Slattery for Senate

Mailing Address P.O. Box 4486

City State Zip Code
Topeka KS 66604

Purpose of Disbursement
2008 KS-S--Primary

Candidate Name
Jim Slattery

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼
 State: KS District:

Transaction ID: D6218

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Slattery for Senate

Mailing Address P.O. Box 4486

City State Zip Code
Topeka KS 66604

Purpose of Disbursement
2008 KS-S--General

Candidate Name
Jim Slattery

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼
 State: KS District:

Transaction ID: D6219

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

85000.00

Form/Schedule: **F3XA**

Transaction ID:

April Monthly Report: This amended report dated 05-13-08 provides additional clarification for the expenditures on Schedule B, supporting Line 21b, as referenced in the FECs letter dated 05-02-08. Please note that no portion of these expenditures were made on behalf of specifically identified federal candidates.
